CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD CENTRAL VALLEY REGION

SECTION 401 WATER QUALITY CERTIFICATION APPLICATION FORM

A minimum of \$640.00 processing fee is required; however, additional fees in accordance with Title 23 CCR § 2200 (a)(2) may also be required. Please use the fee calculator at http://www.waterboards.ca.gov/water_issues/programs/cwa401/docs/dredgefillfeecalculator.xls to determine the total fee. Please include a check payable to the **State Water Resources Control Board.** Attach additional sheets as necessary. If any information is not applicable to the proposed project please indicate that as N/A. Submit the complete form to the appropriate Regional Board office.

2. AGENT INFORMATION*

1. APPLICANT INFORMATION

Applicant:	Agent*
Contact Name:	Contact Name:
Address:	Address:
Phone No:	Phone No:
Fax No:	Fax No:
E-mail Address:	E-mail Address:
	*Complete only if applicable
3. PROJECT DESCRIPTION	
a) Project Title:	
b) Project Location:	
County:	Section: Township: Range:
Quadrangle Name:	Latitude: Longitude:
*Attach site map with "waters" c	learly indicated (e.g. USGS 7 ½ quadrangle map)
information such as: avoidance and project activity impacts to water bo	ide a detailed explanation of all project activities. Include applicable diminimization measures for project impacts; alternatives analysis; dies and/or water quality; and implementation of Low Impact ach additional pages as necessary):
d) Proposed Schedule (start date, a	and completion date):
e) Total Project Size (clearing, gradacreslinear	

4. IMPACTED WATER BODIES

a) Name(s) of Receiving Water Body(ies):
b) Australia at a discretical at a a see flavor de unione para la at a ativita e
b) Anticipated potential stream flow during project activity:
c) Describe potential impacts to water quality:

d) **Waters of the United States:** Indicate in ACRES and LINEAR FEET (where appropriate) the proposed waters of the United States to be impacted by <u>any discharge other than dredging</u>, and identify the impacts(s) as permanent and/or temporary for each water body type listed below:

Water Body Type	Permanent Impacts		Temporary Impacts	
	(acres)	(linear feet)	(acres)	(linear feet)
Jurisdictional Wetland				
Riparian				
Streambed un-vegetated				
Lake/Reservoir				

e) **Non-Federal Waters**: This section is **only** for waters that the U.S. Army Corps of Engineers does **not** consider federally jurisdictional. Indicate in ACRES and LINEAR FEET (where appropriate) the proposed **waters of the State** to be impacted by <u>any discharge other than dredging</u>, and identify the impacts(s) as permanent and/or temporary for each water body type listed below:

Water Body Type	Permanent Impacts		Temporary Impacts	
	(acres)	(linear feet)	(acres)	(linear feet)
Isolated Wetland				
Ditch/Canal				
Other				

f) **Fill:** Indicate the amount (cubic yards) and type of fill material to be discharged/installed in waters of the State/United States:

Type of Material (Soil, concrete, steel, rock)	Amount (cubic yards)	What type of water body? (Wetland, riparian, streambed, lake)	Indicate if fill is in federal or non-federal waters

g) **Dredge/Removal:** Indicate the amount (cubic yards) and type of material to be dredged and/or removed from waters of the State/United States:

Soil, concrete, steel, ock) Amount (cubic yards)		(cubic	What type of water body? (Wetland, riparian, streambed, lake)		removal	Indicate if dredge or removal is in federal or non-federal waters	
	_						
COMPENSATORY May Indicate in ACRES and United States propose Compensatory Mitigati	d LINEAR I ed to be Cr	FEET (where	ored and/or	Enhanced for	r purposes o	f providing	
jurisdictional then attac					110140104 100	.o.a,	
Water Body Type		ated		stored		anced	
, , ,	Cre (acres)	ated (linear ft)	Re (acres)	stored (linear ft)	Enha (acres)	anced (linear ft)	
Jurisdictional Wetland				1			
Jurisdictional Wetland Riparian				1			
Jurisdictional Wetland Riparian Streambed				1			
Jurisdictional Wetland Riparian Streambed Lake/Reservoir	(acres)	(linear ft)	(acres)	(linear ft)	(acres)	(linear ft)	
Jurisdictional Wetland Riparian Streambed	gation or C f applicable aservation acres	(linear ft) Conservation e): Agency of	(acres) Bank, indic	(linear ft) ate the agence	(acres) by, dollar am (water body	(linear ft) ount, acreage,	

6. OTHER ACTIONS/BEST MANAGEMENT PRACTICES (BMPs)

Longitude/Latitude _____

Briefly describe other actions/BMPs to be implemented to Avoid and/or Minimize impacts to waters of the United States, including preservations of habitats, erosion control measures, project scheduling, flow diversions, etc.

_____ Township/Range ____

d) Location of Compensatory Mitigation Site(s) (attach map of suitable quality and detail):

City of Area _____ County _____

7.	OTHER F	PERMITS/AGREEMENTS	S/ETC
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7. OTHER PERMITS/AGREEMENTS/ETC
a) U.S. Army Corps of Engineers Permit: Indicate the type of ACOE permit (check one)
Nationwide Permit No(s) Individual Permit No(s): Regional Permit No(s):
Letter(s) of Permission ACOE Permit Reference Number
Have you notified ACOE of project?
Have you reviewed the General Conditions for your ACOE permit?
Have you attached a copy of the application/notification to ACOE?
b) California Department of Fish and Game Lake or Streambed Alteration Agreement:
Date of Application:
Have you attached a copy of the application?
Has the Agreement been issued? if so, list Agreement number:
c) Water Rights:
If the project is directly related to any diversion, obstruction, extraction, or impoundment of the
natural flow of a river, stream, lake or underground source then provide the Water Right
Application ID Number or Permit ID Number
8. CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA) a) Indicate the type of CEQA Document required for this project:
Categorical Exemption Negative Declaration Environmental Impact Report
Has the document been certified/approved, or has a Notice of Exemption been filed?
If yes date of approval/filing If no, expected approval/filing date:
Lead Agency
Have you attached a copy of the draft/final CEQA documentation*?
* A final copy of valid CEQA documentation must be provided before a project can be certified
b) List State and Federal Threatened/Endangered Species that could potentially be impacted by this project:
DAST/ELITURE DRODOSALS BY THE ADDITIONT
9. PAST/FUTURE PROPOSALS BY THE APPLICANT Briefly list/describe any projects carried out in the last 5 years or planned for implementation in the
next 5 years that are in any way related to the proposed activity or may impact the same receiving body of water. Include the estimated adverse impacts from the past or future projects.

SIGNATORY REQUIREMENTS

All reports, notices, or other documents required by the Water Quality Certification or requested by the Central Valley Regional Water Quality Control Board (Central Valley Water Board) shall be signed by a person described below or by a duly authorized representative of that person.

- a. For a corporation: by a responsible corporate officer such as (1) a president, secretary, treasurer, or vice president of the corporation in charge of a principal business function; (2) any other person who performs similar policy or decision-making functions for the corporation; or (3) the manager of one or more manufacturing, production, or operating facilities if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.
- b. For a partnership or sole proprietorship: by a general partner or the proprietor.
- c. For a municipality, State, federal, or other public agency: by either a principal executive officer or ranking elected official.

10. CERTIFICATION [Any person signing or submitting a document, e.g. an application, a monitoring report, etc., to demonstrate compliance with the Water Quality Certification regulations shall make the following certification, whether written or implied]

information, were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel property gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment."				
Print Name:	_ Title:			
Signature:	_ Date:			
STATEMENT OF AUTHORIZATION (if designating	a specific agent)			
I hereby authorize the processing of this application and to furnish, upon this permit application.	to act on my behalf as my agent in request, supplemental information in support of			
X	ent)			

All information on this application becomes part of the public record, and as such is subject to public records requests disclosure. In addition, the application will be posted for public review on the Regional Board's web site in accordance with California Code of Regulations Title 23 Section 3858.